CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT		ATE OR COMMITTEE	_ ,,,,		
10/11/10	COMMITTEE	TO ELECT	7-111	VAN	
2.b. IF COMMITTEE, NAME OF CANDIDATE			3. ELECTION DATE	,	
MIKE EVAN			8/5/1	10	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City	State	Zip Code	Phone	
6057 EAST BRAINER	ORD CHATTA	NOUTH TN	37421 4	23)648-2122	
4.b. CANDIDATE'S HOME ADDRESS (if differ Street or Rural Route	ent than 4.a.) City	State	Zin Code	Dhara	
5209 MONA LEE LANE	OOLTEWAA	7N 3750	(101.	Phone 396 - 9839	
OFFICE SOUGHT (include district number)			TREASURER (may be	candidate)	
DISTRICT 9 SCHOOL BOX	neo	A. RON K	OPLAN		
7. CATEGORY OR REPORT (Check one)		ı 🗆			
FIRST SECOND THIRD		RE- PRE-	MID-YEAR	YEAR-END	
QUARTER QUARTER QUARTE 8.a. BEGINNING DATE OF REPORTING PERIOD		MARY GENERAL ENDING DATE OF REPO	SUPPLEMENTAL DRING PERIOD	SUPPLEMENTAL	
7/27/10		9/30/10	SKTINGT ERIOD		
9. (Check one)		1/20/10			
a. This campaign is exempt from deta tures total \$1,000 or less for this re	alled disclosure because con- porting period. (Complete it	tributions (including in-k ems 12d., 12e, and 12f	ind) received total \$1,00	00 or less AND expendi-	
b. This campaign is required to file a and/or expenditures total more tha	detailed financial disclosure l n \$1.000 for this reporting pe	because contributions (i	including in-kind) receive	ed total more than \$1,000	
10. I/we do solemnly swear or affirm that the	information contained in thi	is campaign financial di	sclosure report is true a	and that this report is an	
accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign					
Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.					
11:0000					
Muli SEN	10/11/10	/ Mun	While	10/11/10	
signature of candidate	date	signature	of political treasurer	date	
11. WITNESS SIGNATURE					
Brown lette William H	- istalia	ha 1	# 1/e01	At 101.110	
Denemy Afficanon	10/11/10	allmake	ac Harand	X 10/10/10	
signature of witness	date	sign	ature of witness	date	
12. SUMMARY					
a. BALANCE ON HAND LAST REPORT			. 540,70		
			\$		
b. TOTAL RECEIPTS THIS PERIOD			4	-	
c. TOTAL DISBURSEMENTS THIS PERIC	D		\$ 160.00	_	
d. BALANCE ON HAND (12.a. plus 12.i				\$ 380.70	
75	:010 OCT 13 PH 2:	7		B	
e. TOTAL LOANS OUTSTANDING		/		\$	
f TOTAL OBLICATIONS OUTSTANDING	HOISSIMMOO			\$ 1912.50	
f. TOTAL OBLIGATIONS OUTSTANDING	·······[46]			\$	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COVERING THE PERIOD			
COMMITTEE TO ELECT MIKE EVATI	FROM: 7/27/10 TO: 9/30/10				
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)					
a. Unitemized Contributions (\$100 or less from each source this	period)	\$			
b. Itemized Contributions (over \$100 from each source this period	d)	\$			
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add	15.a. and 15.b.)	\$			
16. LOANS RECEIVED THIS REPORTING PERIOD		\$			
17. INTEREST RECEIVED THIS REPORTING PERIOD	•••••	\$			
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in it	em 12.b.)	\$ <u>~~</u>			
DISBURSEMENTS					
19. EXPENDITURES (other than loan payments)					
a. Expenditures (\$100 or less each payee this period) (must be liste	ed by category - e	.g., printing, postage, gasoline)			
	\$				
	\$				
	\$				
	\$				
	\$				
	\$				
	\$				
	\$				
	\$				
T. I. I. C. T					
Total of Expenditures (\$100 or less each payee)					
b. Itemized Expenditures (Over \$100 each payee this period)					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)\$					
20. LOAN REPAYMENTS MADE THIS PERIOD\$					
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)\$					
22.IN-KIND CONTRIBUTIONS					
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$					
B. Itemized in-kind contributions (over \$100 from each source this period)\$					
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$					
23. OBLIGATIONS					
a. Unitemized Obligations Outstanding (\$100 or less each)\$					
b. Itemized Obligations Outstanding (Over \$100 each)					
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)					

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

					TO: 9/30/10 Amount	
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name CHATTANOOSA FREE PRESS Address		ABVERTISING		160 00		
City	State Zip Code					
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	Last Name/Business Name					
Address						
City	State	Zip Code				
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code	-			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code	•			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)				160.00		

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE			2. REPORT COVERING THE PERIOD			
COMMITTEE TO ELECT MIKE EVAN			FROM: 7/27/			
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any)		Outstanding Balance (Beginning of Period)	Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)	
person/vendor at the end of the reporting p			(3	7 1110 7 01100	THIS T CHOC	(End of Ferrod)
First Name	Middle Na	me				
Last Name/Business Name FARWHY OUT JOEN	ADU	ERTISING				
Address Box 60125	1,00 0.01,000		8/2.50	0	D	812,50
CHARLOTE	State	Zip Code 28620				
Description of Obligation			-			
First Name	Middle Na	me				
Last Name/Business Name	Last Name/Business Name RAR HOSDITHLINY LIC		1			
I Address	Address		1,100.00	0	0	1,100.00
CHANANOOFA	State 770	Zip Code 37408] '			
Description of Obligation						
First Name	Middle Name					
Last Name/Business Name			-			
Address			1			
City	State	Zip Code	1			
Description of Obligation				•		
First Name	Middle Name					
Last Name/Business Name						
Address						
City	State	Zip Code				
Description of Obligation				L		
First Name	Middle Na	me				
Last Name/Business Name						
Address			-			
City	State	Zip Code				
Description of Obligation	J		2		-	
4. TOTALS	_					
(Total from Outstanding Balance - (End of Period) in item 23b. on summary page.)	column mus	st also be shown				19/2.50
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